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APPLICANTS

Theodore W. Crofford, Fort Worth, TX;

\*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/228,907 08/27/2002 PAT 6,695,883 *OK AR*  
 which claims benefit of 60/371,837 04/11/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NONE AR*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/12/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 7	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
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35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged *Amitha Ramesh AR*  
 Examiner's Signature Initials

ADDRESS  
 24283  
 PATTON BOGGS  
 1660 LINCOLN ST  
 SUITE 2050  
 DENVER , CO  
 80264

TITLE  
 Femoral neck fixation prosthesis

FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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